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CONFIRMATION NO. 3765

SERIAL NUMBER 10/648,863	FILING OR 371(c) DATE 08/26/2003 RULE	CLASS 514	GROUP ART UNIT 1617	ATTORNEY DOCKET NO. C-3258
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APPLICANTS

John A. Delyani, Grays Lake, IL;
 Kenton N. Fedde, Webster Groves, MO;
 John W. Funder, Victoria, AUSTRALIA;
 Michael R. Ward, Victoria, AUSTRALIA;
 Peter Kanellakis, Victoria, AUSTRALIA;
 Alex Bobik, Victoria, AUSTRALIA;

**** CONTINUING DATA *******

This application is a CON of 09/709,253 11/08/2000 ABN which claims benefit of 60/164,390 11/09/1999 *SM*

**** FOREIGN APPLICATIONS ********None***IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****

12/30/2003

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY IL	SHEETS DRAWING 4	TOTAL CLAIMS 74	INDEPENDENT CLAIMS 8
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS

PHARMACIA CORPORATION
 of Pfizer Inc.
 Corporate Patent Department
 P.O. Box 1027
 Chesterfield, MO63006

TITLE

Method for treating, inhibiting or preventing pathogenic change resulting from vascular injury with an aldosterone antagonist

FILING FEE RECEIVED 2142	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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